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PATENT ADDITION TO SEE THE PROPERTY OF COMMERCE.

(Catomin 2)

NUMBER EXTRA

PATENT APPLICATION FEE DETERMINATION RECORD

CLAIMS AS FILED - PART I

(Cohuma 1)

NUMBER FILED

SMALL ENTITY OR

SMALL ENTITY

TOTAL

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TOTAL

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BASIC FEE (37 CFR 1.16(a))		140	A NAW		1	Ŀ		s	OR	-	s	
TOTAL CLAIMS			minus :	10 = *			x S <u>(,)</u> =		ÖR	x S <i>į S</i> . =		
INDE	PENDENT CLAIN	18 .	minus	3 = 4	- 1	- [: <u> أسين</u>		OR	x32:-		
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.166))						+ <u>/]/</u> =	-	OR	+300 =			
						_	TOTAL		OR	TOTAL		
■ If the difference in culturn 1 is less then zero, enter "U" in culturn 2										OTHER TI	HAN	
	CLAIMS AS AMENDED - PART II (Column I) (Column 2) (Column 3)				SMALL ENTITY OR SMALL ENTITY							
AMENDMENT A		CLAIMS REMAINING AFTER MENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAC FEE		RATE	ADDL-:8 TIONAL!! FEE	
	Total * (37 CFR (.16(c))	43	Minus	·· 73	=	× S	<u>, s9 =</u> ,44 =	in Dive	OR.	25/B =	··-	i indi Lina
	(37 CFR 1.16(b))	10	Minus	10	ist officialisation .	┨┠	× 150 =		OR.	240		i ',:,-
	TAGE FROM THE CONTRACT OF THE						+[30_2	*:	OR*	300 hui	Minimizero 14	rantilite
and filld 7/13/05 (Column 2) (Column 3)						ΑĐ	TOTAL DIT. FEE	<u> </u>	OR	TOTAL DDIT. FEE		· · ·
AMENDMENT B		CLAIMS REMAINING AFTER MENDMENT		HIGHEST . NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	addimin Monaen Peers	e l
	Total (37 CFR 1.16(c))	4.5	Minus	43	=		xs <u>9</u> =	1000	OR'	xs18 -	/	Mi
	Independent (37 CFR 1.16(b))	/ /0	Minus	··· 10 _	= /	ال	×44	1 / 3	OR.	x <u>06</u> =		1
*	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM 137 CFR 1.16(4))						+150 =	/ : *:	OR	.300.	25/1/17214 0	730 t. t.
(Column 1) (Column 2) (Column 3)						_ ^	TOTAL DDIT. FEE	 	ÖR,	DDIT. FEE	/	<u> </u>
. AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL- FEE		RATE	ADDIS STONAL REES	S
	Total gross (1444)	•	Minus	**	=		x S <u>7</u> -	7	OR:	xs/8 =	Ι	
		•	Minus	4.00	-		× <u>44</u> =	**	OR	×88-	:	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CTR 1.1868)					ŀ	+ <u>150</u> °	, J.	OR	1.200	·	

Burden Hour Statement: This form is estimated to take 0.2 hours for complete. Time will very depending upon the needs of the individual case, Any comments on the amount of time you are equited to complete this form should be sent to the Chief Information Office, U.S. Patent and Yaskemark Any comments on the amount of time you are equited to complete this form should be sent to the Chief Information Office, U.S. Patent and Yaskemark Office, Washington, DC 20231, 101 NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioners for Patents, Washington, DC 20231.

FOR

^{*} If the entry in column 1 is less than the entry in column 2, write "0" in culumn 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

^{***} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.